

## **PAST PERFORMANCE SURVEY**

**DTFAEN-12-R-00049**

**Installation of Gable Roof**

**RCAG Building**

**Tallahassee, Florida**

**Page 1 of 4**

**To:** \_\_\_\_\_ (Point of Contact)  
\_\_\_\_\_ (Company)  
\_\_\_\_\_ (Phone)  
\_\_\_\_\_ (Fax)

The Federal Aviation Administration is currently evaluating \_\_\_\_\_ and you were listed you as a performance reference. It would be greatly appreciated if you would take 5 or 10 minutes to complete the following information and via fax within three (3) days of receipt to my attention at: **Fax 404-305-5774**.

If you have any questions or comments, feel free to contact me. Thank you in advance for your assistance.

Maxine L. Cross, Contracting Officer  
Federal Aviation Administration  
Eastern Logistics Service Area  
Acquisition Branch, Routing Symbol AAQ-510  
College Park, GA 30337  
Tel: 404-305-5981

1. Contractor Name:		2. Contract Number:	
3. Contractor Address:		4. Contract Type: __ Firm Fixed Price ____ Cost Reimbursement ____ Other (Please Specify)	
5. Your Agency Name:		6. Your Agency POC/Phone/email/Fax:	
7. Period of Performance:		8. Dollar Amount of Award: \$ Total Dollar Value with Mods:	
9. Title of Contract:			
10. Description of Contract Service:			
11. Type of Work: Construction__ Service Support__ Service__ Supply__ Other_____			

**NOTE: 1-Unsatisfactory 2- Marginal 3-Satisfactory 4-Good 5-Outstanding**

If Not Applicable, just write in N/A

Please provide additional comments below for ratings of 3 and below.

## **PAST PERFORMANCE SURVEY**

**DTFAEN-12-R-00049**

**Installation of Gable Roof**

**RCAG Building**

**Tallahassee, Florida**

**Page 2 of 4**

1. Did the contractor commit adequate resources in timely fashion to the contract to meet the requirements and to successfully solve problems? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
2. To what extent did the contractor respond positively and promptly to technical direction, contract change orders, etc.? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
3. How reliably did the contractor follow through on commitments? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
4. To what extent did the contractor's management system provide visibility into problems and risks? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
5. How responsive do you think the contractor was to information requests, issues, or problems during the course of the contract? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
6. How effective has the contractor been in identifying user requirements? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
7. To what extent did the contractor have the ability to administer and manage the contract? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
8. To what extent did the contractor issue professional correspondence? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
9. How well did the contractor adhere to the Statement of Work? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
10. What was your level of satisfaction with the contractor's management and support staff? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
11. What was your level of satisfaction with the contractor's Supervisor(s)? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
12. To what extent did the contractor submit required reports and documentation in a timely manner? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
13. To what extent were the contractor's reports and documentation accurate and complete? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
14. To what extent was the contractor's maintenance and problem tracking/reporting documentation timely, accurate and of appropriate content? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐

## **PAST PERFORMANCE SURVEY**

DTFAEN-12-R-00049

Installation of Gable Roof

RCAG Building

Tallahassee, Florida

Page 3 of 4

15. To what extent did the contractor comply with safety requirements? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
16. What was your level of satisfaction with the contractor's overall quality of service? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
17. To what extent was the contractor effective in interfacing with the Government staff? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
18. What was your level of overall customer satisfaction? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐
19. To what extent were the contractor's employees experienced and qualified? 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐

### **Respond: Yes or No.**

20. Were there any cure notices issued? Yes: \_\_\_\_ No: \_\_\_\_
21. Was contractor pro-active? Yes: \_\_\_\_ No: \_\_\_\_
22. Did contractor suggest cost-saving changes? Yes: \_\_\_\_ No: \_\_\_\_
23. Would you recommend this contractor? Yes: \_\_\_\_ No: \_\_\_\_

### **For Federal contracts:**

24. Were there any Labor Department Investigations? Yes: \_\_\_\_ No: \_\_\_\_

24a. If yes, please describe reason and final outcome.

---

25. Were there any safety investigations? Yes: \_\_\_\_ No: \_\_\_\_

25a. If yes, please describe reason and final outcome.

---

26. Were there any security investigations? Yes: \_\_\_\_ No: \_\_\_\_

26a. If yes, please describe reason and final outcome.

---

## **PAST PERFORMANCE SURVEY**

**DTFAEN-12-R-00049**

**Installation of Gable Roof**

**RCAG Building**

**Tallahassee, Florida**

**Page 4 of 4**

27. Was there a partial or complete termination for default or convenience?

Yes: \_\_\_\_ No: \_\_\_\_

27a. If yes, please describe reason and final outcome.

\_\_\_\_\_

28. Are there any pending terminations?

Yes: \_\_\_\_ No: \_\_\_\_

29. What is/was the duration of the contract? \_\_\_\_\_

30. Were there any performance issues regarding the contractor's work? If yes, please describe.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please provide other comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_